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| United States Bankruptcy C Northern District of Illinois, Eastern | | | | ion | | | Vol | untary Petition |
|---|---|---|--|--|---|--|--|---|
| Name of Debtor (if individual, enter Last, First, Middle): WILSCHEK, ROBERT A | | | | | ebtor (Spouse , KIMBERL | | , Middle): | |
| All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names): | | | | | used by the J maiden, and | | | years |
| Last four digits of Soc. Sec. or Individual-Taxpa; (if more than one, state all) | yer I.D. (ITIN)/Comp | lete EIN | (if more | our digits of than one, state | all) | Individual- | Гахрауег I.I | D. (ITIN) No./Complete EIN |
| Street Address of Debtor (No. and Street, City, at 3N901 Baert Lane Saint Charles, IL | nd State): | ZIP Code | Street 3N9 | | Joint Debtor t Lane | (No. and Str | reet, City, a | nd State): ZIP Code |
| County of Posidones on of the Principal Place of | | 0175 | Count | y of Posido | ence or of the | Dringing Di | age of Pusis | 60175 |
| County of Residence or of the Principal Place of Kane | Business: | | Kai | • | ince or or the | Principai Pi | ace of busin | iess: |
| Mailing Address of Debtor (if different from stre | et address): | | Mailin | g Address | of Joint Debt | or (if differe | nt from stre | et address): |
| | Г | ZIP Code | 4 | | | | | ZIP Code |
| Location of Principal Assets of Business Debtor (if different from street address above): | <u>'</u> | | • | | | | | |
| Type of Debtor (Form of Organization) (Check one box) | Nature of | f Business | | | | of Bankrup Petition is Fi | | Under Which |
| Individual (includes Joint Debtors) See Exhibit D on page 2 of this form. □ Corporation (includes LLC and LLP) □ Partnership □ Other (If debtor is not one of the above entities, check this box and state type of entity below.) | ☐ Health Care Busi ☐ Single Asset Rea in 11 U.S.C. § 10 ☐ Railroad ☐ Stockbroker ☐ Commodity Brol ☐ Clearing Bank ☐ Other | al Estate as de 01 (51B) | efined | Chapte Chapte Chapte Chapte Chapte | er 7 er 9 er 11 er 12 | ☐ Cl of ☐ Cl of | hapter 15 Po a Foreign I hapter 15 Po a Foreign I | etition for Recognition Main Proceeding etition for Recognition Nonmain Proceeding |
| Chapter 15 Debtors Country of debtor's center of main interests: Each country in which a foreign proceeding by, regarding, or against debtor is pending: | Tax-Exen | if applicable) mpt organizati ne United State | able) Debts are primarily consumer debts, defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for | | | Debts are primarily business debts. | | |
| Filing Fee (Check one box) Full Filing Fee attached Filing Fee to be paid in installments (applicable to a attach signed application for the court's consideratic debtor is unable to pay fee except in installments. R Form 3A. Filing Fee waiver requested (applicable to chapter attach signed application for the court's consideration) | individuals only). Must on certifying that the tule 1006(b). See Officia 7 individuals only). Mus | Check all t. B. B. B. Acc | otor is a snotor is not otor's aggreless than \$ applicable lan is being ceptances of | regate nonco \$2,490,925 (as boxes: ag filed with of the plan w | debtor as defir ness debtor as c ntingent liquida amount subject this petition. | defined in 11 United debts (exc to adjustment | C. § 101(51D J.S.C. § 101(cluding debts on 4/01/16 o | |
| Statistical/Administrative Information ☐ Debtor estimates that funds will be available ☐ Debtor estimates that, after any exempt prope there will be no funds available for distribution | erty is excluded and a | secured credi | tors. | | , 1120(0). | THIS | SPACE IS F | FOR COURT USE ONLY |
| Estimated Number of Creditors □ □ □ □ □ 1- 50- 100- 200- 1 | | 10,001- 2: |] 5,001- 0,000 | 50,001- 100,000 | OVER 100,000 | | | |
| \$50,000 \$100,000 \$500,000 to \$1 | \$1,000,001 \$10,000,001 to \$50 | to \$100 to |] 100,000,001 \$500 illion | \$500,000,001 to \$1 billion | More than \$1 billion | | | |
| \$0 to \$50,001 to \$100,001 to \$500,001 \$ | | \$50,000,001 \$: to \$100 to |] 100,000,001 \$500 | \$500,000,001 to \$1 billion | | | | |

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B1 (Official Form 1)(04/13) Page 2 Name of Debtor(s): Voluntary Petition **WILSCHEK, ROBERT A** WILSCHEK, KIMBERLY (This page must be completed and filed in every case) All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet) Case Number: Date Filed: Location Where Filed: - None -Date Filed: Location Case Number: Where Filed: Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet) Name of Debtor: Case Number: Date Filed: - None -District: Relationship: Judge: Exhibit B Exhibit A (To be completed if debtor is an individual whose debts are primarily consumer debts.) (To be completed if debtor is required to file periodic reports (e.g., I, the attorney for the petitioner named in the foregoing petition, declare that I forms 10K and 10Q) with the Securities and Exchange Commission have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 under each such chapter. I further certify that I delivered to the debtor the notice and is requesting relief under chapter 11.) required by 11 U.S.C. §342(b). ☐ Exhibit A is attached and made a part of this petition. \mathbf{X} /s/ Richard G Larsen November 24, 2014 Signature of Attorney for Debtor(s) (Date) Richard G Larsen Exhibit C Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? Yes, and Exhibit C is attached and made a part of this petition. No. Exhibit D (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) Exhibit D completed and signed by the debtor is attached and made a part of this petition. If this is a joint petition: ■ Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition. Information Regarding the Debtor - Venue (Check any applicable box) Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District. Certification by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes) Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.) (Name of landlord that obtained judgment) (Address of landlord) Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and Debtor has included with this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition. Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).

Page 3 of 50 Document **B1** (Official Form 1)(04/13)

Voluntary Petition

(This page must be completed and filed in every case)

Signatures

Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X /s/ ROBERT A WILSCHEK

Signature of Debtor ROBERT A WILSCHEK

X /s/ KIMBERLY WILSCHEK

Signature of Joint Debtor KIMBERLY WILSCHEK

Telephone Number (If not represented by attorney)

November 24, 2014

Date

Signature of Attorney*

X /s/ Richard G Larsen

Signature of Attorney for Debtor(s)

Richard G Larsen 6193054

Printed Name of Attorney for Debtor(s)

Springer Brown, LLC

Firm Name

400 S. County Farm Road Suite 330 Wheaton, IL 60187

Address

630-510-0000 Fax: 630-510-0004

Telephone Number

November 24, 2014

Date

*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

Signature of a Foreign Representative

Page 3

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

Name of Debtor(s):

WILSCHEK, ROBERT A WILSCHEK, KIMBERLY

- ☐ I request relief in accordance with chapter 15 of title 11. United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.
- ☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankrutpcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

Date

Address

Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. §110; 18 U.S.C. §156.

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B 1D (Official Form 1, Exhibit D) (12/09)

United States Bankruptcy Court Northern District of Illinois, Eastern Division

| In re | ROBERT A WILSCHEK KIMBERLY WILSCHEK | (| Case No. | |
|-------|--|-----------|----------|---|
| | | Debtor(s) | Chapter | 7 |

EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.] ____

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

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| Page 2 D (Official Form 1, Exhibit D) (12/09) - Cont. |
|---|
| □ 4. I am not required to receive a credit counseling briefing because of: [Check the applicable tatement.] [Must be accompanied by a motion for determination by the court.] □ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.); □ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or |
| through the Internet.); Active military duty in a military combat zone. |
| □ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling equirement of 11 U.S.C. § 109(h) does not apply in this district. |
| I certify under penalty of perjury that the information provided above is true and correct. |
| Signature of Debtor: /s/ ROBERT A WILSCHEK |
| ROBERT A WILSCHEK |
| Date: November 24, 2014 |

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B 1D (Official Form 1, Exhibit D) (12/09)

United States Bankruptcy Court Northern District of Illinois, Eastern Division

| In re | ROBERT A WILSCHEK KIMBERLY WILSCHEK | | Case No. | |
|-------|--|-----------|----------|---|
| | | Debtor(s) | Chapter | 7 |

EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.] ____

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

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| B 1D (Official Form 1, Exhibit D) (12/09) - Cont. | Page 2 |
|--|--|
| statement.] [Must be accompanied by a motion for de ☐ Incapacity. (Defined in 11 U.S.C. § mental deficiency so as to be incapable of rea financial responsibilities.); ☐ Disability. (Defined in 11 U.S.C. § | 109(h)(4) as impaired by reason of mental illness or lizing and making rational decisions with respect to 109(h)(4) as physically impaired to the extent of being n a credit counseling briefing in person, by telephone, or |
| requirement of 11 U.S.C. § 109(h) does not apply in | |
| I certify under penalty of perjury that the | information provided above is true and correct. |
| <u>-</u> | /s/ KIMBERLY WILSCHEK KIMBERLY WILSCHEK 014 |

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B 6 Summary (Official Form 6 - Summary) (12/13)

United States Bankruptcy Court Northern District of Illinois, Eastern Division

| In re | ROBERT A WILSCHEK, | | Case No | | |
|-------|--------------------|---------|---------|---|--|
| | KIMBERLY WILSCHEK | | | | |
| • | | Debtors | Chapter | 7 | |
| | | | | | |

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

| NAME OF SCHEDULE | ATTACHED (YES/NO) | NO. OF SHEETS | ASSETS | LIABILITIES | OTHER |
|---|----------------------|------------------|-------------------|-------------|----------|
| A - Real Property | Yes | 1 | 402,596.00 | | |
| B - Personal Property | Yes | 4 | 659,038.95 | | |
| C - Property Claimed as Exempt | Yes | 2 | | | |
| D - Creditors Holding Secured Claims | Yes | 1 | | 366,034.33 | |
| E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E) | Yes | 2 | | 6,165.07 | |
| F - Creditors Holding Unsecured Nonpriority Claims | Yes | 5 | | 166,902.10 | |
| G - Executory Contracts and Unexpired Leases | Yes | 1 | | | |
| H - Codebtors | Yes | 1 | | | |
| I - Current Income of Individual Debtor(s) | Yes | 2 | | | 6,168.73 |
| J - Current Expenditures of Individual Debtor(s) | Yes | 2 | | | 8,015.26 |
| Total Number of Sheets of ALL Schedu | ıles | 21 | | | |
| | T | otal Assets | 1,061,634.95 | | |
| | | | Total Liabilities | 539,101.50 | |

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B 6 Summary (Official Form 6 - Summary) (12/13)

United States Bankruptcy Court Northern District of Illinois, Eastern Division

| In re | ROBERT A WILSCHEK, | | Case No. | | |
|-------|--------------------|---------|----------|---|--|
| | KIMBERLY WILSCHEK | | | | |
| _ | | Debtors | Chapter | 7 | |

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C.§ 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. \S 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

| Type of Liability | Amount |
|---|----------|
| Domestic Support Obligations (from Schedule E) | 0.00 |
| Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E) | 6,165.07 |
| Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed) | 0.00 |
| Student Loan Obligations (from Schedule F) | 0.00 |
| Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E | 0.00 |
| Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F) | 0.00 |
| TOTAL | 6,165.07 |

State the following:

| Average Income (from Schedule I, Line 12) | 6,168.73 |
|--|----------|
| Average Expenses (from Schedule J, Line 22) | 8,015.26 |
| Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20) | 9,183.62 |

State the following:

| 1. Total from Schedule D, "UNSECURED PORTION, IF ANY" | | 867.33 |
|--|----------|------------|
| 2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column | 6,165.07 | |
| 3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column | | 0.00 |
| 4. Total from Schedule F | | 166,902.10 |
| 5. Total of non-priority unsecured debt (sum of 1, 3, and 4) | | 167,769.43 |

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B6A (Official Form 6A) (12/07)

| In re | ROBERT A WILSCHEK, |
|-------|--------------------|
| | KIMBERLY WILSCHEK |

| Case No. | | |
|----------|--|--|
| | | |

Debtors

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

| Description and Location of Property | Nature of Debtor's Interest in Property | Husband, Wife, Joint, or Community | Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption | Amount of Secured Claim |
|---|--|---|--|----------------------------|
| Single Family Home 3N901 Baert Lane St. Charles, Illinois | | J | 365,167.00 | 366,034.33 |
| Weston Time Share - Arizona | | J | 11,025.00 | 7,537.05 |
| Westin Time Share - Cancun Mexico | | | 10,800.00 | 5,239.45 |
| Westin Timeshare - Cancun, Mexico | J | 12,105.00 | 9,044.34 | |
| Westin timeshare - Scottsdale Arizona | | J | 3,499.00 | 0.00 |

Sub-Total > 402,596.00 (Total of this page)

402,596.00 Total >

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B6B (Official Form 6B) (12/07)

| In re | ROBERT A WILSCHEK, |
|-------|--------------------|
| | KIMBERLY WILSCHEK |

Debtors

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

| | Type of Property | N O N E | Description and Location of Property | Husband, Wife, Joint, or Community | Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption |
|----|--|------------------|---|---|---|
| 1. | Cash on hand | | On person | J | 50.00 |
| 2. | Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, | | Bank of America Business account Medical Revenue Solutions | W | 159.00 |
| | thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or | | Bank of America Checking Account No. 5973 | J | 169.78 |
| | cooperatives. | | Chase Checking Account No. 8909 | J | 48.31 |
| | | | Bank of America Checking Account No. 5465 | Н | 21.57 |
| 3. | Security deposits with public utilities, telephone companies, landlords, and others. | X | | | |
| 4. | Household goods and furnishings, including audio, video, and computer equipment. | | Used household furnishings | J | 2,000.00 |
| 5. | Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles. | | Painting - LaLonde | J | 1,000.00 |
| 6. | Wearing apparel. | Х | | | |
| 7. | Furs and jewelry. | | Wedding Rings and Rolex watch (1998) approximate value \$1,000.00 | W | 1,000.00 |
| 8. | Firearms and sports, photographic, and other hobby equipment. | Х | | | |
| 9. | Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each. | | First Investors Life Insurance/Death Benefit \$66,781.00 Cash Value \$34,014.92 Loan \$14,527.10 | Н | 19,487.10 |
| | | | | Sub-Tota | al > 23,935.76 |

3 continuation sheets attached to the Schedule of Personal Property

(Total of this page)

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B6B (Official Form 6B) (12/07) - Cont.

| In re | ROBERT A WILSCHEK, |
|-------|--------------------|
| | KIMBERLY WILSCHEK |

Debtors

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

| Type of Property | N O Description and Location of Property E | Husband, Wife, Joint, or Community | Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption |
|--|---|---|---|
| | First Investors Life Insurance (Children's Ploicy) Death benefit \$24,568.00 Cast \$2,960.69 Loan \$321.07 | Н | 2,639.62 |
| | First Investors Life Insurance (Children's policy) Death benefit \$24,816.00 Cash \$2,808.96 Loan \$321.52 | н | 2,559.44 |
| 10. Annuities. Itemize and name each issuer. | x | | |
| 11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or | IRA - Transamerica Life Insurance Account Number 106752LK8 | W | 101,594.84 |
| under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).) | College Fund for Minor Dependent American Funds VCSP/ College America Account Number 74739251 | J | 39,814.41 |
| | College Fund for minor dependent American Funds VCSP/College America Account Number 74739044 | J | 57,057.67 |
| 12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing | Debtor 401(k) Xlem | н | 19,436.28 |
| plans. Give particulars. | IRA - RBC Capital Markets LLC Accout 70506312 | н | 77,211.29 |
| | IRA - RBC Capital Markets, LLC Account Number 705-06480 | W | 57,124.86 |
| | IRA - Ameritrade Clearing Account Number 964-908852 | Н | 28,953.09 |
| | IRA - ING USA Annuity & Life Account Number C179368-OX | Н | 183,906.53 |
| | IRA - Community National Bank Account Number 00091009158 | Н | 56,763.80 |
| | 401(k) Edward Hospital with Fidelity Account Number 62990 | W | 2,427.36 |

Sub-Total > **629,489.19** (Total of this page)

Sheet <u>1</u> of <u>3</u> continuation sheets attached to the Schedule of Personal Property

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B6B (Official Form 6B) (12/07) - Cont.

| In re | ROBERT A WILSCHEK, |
|-------|---------------------|
| | KIMBERI Y WII SCHEK |

Debtors

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

| | Type of Property | N O N E | Description and Location of Property | Husband, Wife, Joint, or Community | Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption |
|-----|--|------------------|--|---|---|
| 13. | Stock and interests in incorporated and unincorporated businesses. Itemize. | | Medical Revenue Solutions, LLC Kim Wilschek sole member (home based business) | W | 0.00 |
| 14. | Interests in partnerships or joint ventures. Itemize. | X | | | |
| 15. | Government and corporate bonds and other negotiable and nonnegotiable instruments. | X | | | |
| 16. | Accounts receivable. | X | | | |
| 17. | Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars. | X | | | |
| 18. | Other liquidated debts owed to debtor including tax refunds. Give particulars. | X | | | |
| 19. | Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property. | X | | | |
| 20. | Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust. | X | | | |
| 21. | Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each. | X | | | |
| 22. | Patents, copyrights, and other intellectual property. Give particulars. | X | | | |
| 23. | Licenses, franchises, and other general intangibles. Give particulars. | X | | | |
| | | | | | |

Sub-Total > (Total of this page)

0.00

Sheet **2** of **3** continuation sheets attached to the Schedule of Personal Property

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B6B (Official Form 6B) (12/07) - Cont.

| In re | ROBERT A WILSCHEK, |
|-------|--------------------|
| | KIMBERLY WILSCHEK |

Debtors

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

| | Type of Property | N O N E | Description and Location of Property | Husband, Wife, Joint, or Community | Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption |
|-----|---|------------------|--|---|---|
| 24. | Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes. | X | | | |
| 25. | Automobiles, trucks, trailers, and other vehicles and accessories. | | 2007 Mitsubishi Endeavor 180,000 miles | W | 5,114.00 |
| 26. | Boats, motors, and accessories. | X | | | |
| 27. | Aircraft and accessories. | X | | | |
| 28. | Office equipment, furnishings, and supplies. | • | desktop computer, laptop, injk jet printer | J | 500.00 |
| 29. | Machinery, fixtures, equipment, and supplies used in business. | X | | | |
| 30. | Inventory. | X | | | |
| 31. | Animals. | 1 | family dog | J | 0.00 |
| 32. | Crops - growing or harvested. Give particulars. | X | | | |
| 33. | Farming equipment and implements. | X | | | |
| 34. | Farm supplies, chemicals, and feed. | X | | | |
| 35. | Other personal property of any kind not already listed. Itemize. | X | | | |

Sub-Total > (Total of this page)

Total > **659,038.95**

Sheet <u>3</u> of <u>3</u> continuation sheets attached to the Schedule of Personal Property

(Report also on Summary of Schedules)

5,614.00

B6C (Official Form 6C) (4/13)

In re ROBERT A WILSCHEK, KIMBERLY WILSCHEK

| Case No. |
|----------|
| |

Debtors

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

| Debtor claims the exemptions to which debtor is entitled under: | ☐ Check if debtor claims a homestead exemption that exceeds |
|---|---|
| (Check one box) | \$155,675. (Amount subject to adjustment on 4/1/16, and every three years thereafte |
| ☐ 11 U.S.C. §522(b)(2) | with respect to cases commenced on or after the date of adjustment.) |
| 11 II S C 8522(b)(3) | |

| Description of Property | Specify Law Providing Each Exemption | Value of Claimed Exemption | Current Value of Property Without Deducting Exemption |
|--|--|----------------------------------|---|
| Cash on Hand On person | 735 ILCS 5/12-1001(b) | 50.00 | 50.00 |
| Checking, Savings, or Other Financial Accounts, C Bank of America Business account Medical Revenue Solutions | Certificates of Deposit 735 ILCS 5/12-1001(b) | 159.00 | 159.00 |
| Bank of America Checking Account No. 5973 | 735 ILCS 5/12-1001(b) | 169.78 | 169.78 |
| Chase Checking Account No. 8909 | 735 ILCS 5/12-1001(b) | 48.31 | 48.31 |
| Bank of America Checking Account No. 5465 | 735 ILCS 5/12-1001(b) | 21.57 | 21.57 |
| Household Goods and Furnishings Used household furnishings | 735 ILCS 5/12-1001(b) | 2,000.00 | 2,000.00 |
| Books, Pictures and Other Art Objects; Collectible Painting - LaLonde | <u>s</u> 735 ILCS 5/12-1001(a) | 1,000.00 | 1,000.00 |
| Furs and Jewelry Wedding Rings and Rolex watch (1998) approximate value \$1,000.00 | 735 ILCS 5/12-1001(b) | 1,000.00 | 1,000.00 |
| Interests in Insurance Policies First Investors Life Insurance/Death Benefit \$66,781.00 Cash Value \$34,014.92 Loan \$14,527.10 | 215 ILCS 5/238 | 19,487.10 | 19,487.10 |
| First Investors Life Insurance (Children's Ploicy) Death benefit \$24,568.00 Cast \$2,960.69 Loan \$321.07 | 215 ILCS 5/238 | 2,639.62 | 2,639.62 |
| First Investors Life Insurance (Children's policy) Death benefit \$24,816.00 Cash \$2,808.96 Loan \$321.52 | 215 ILCS 5/238 | 2,559.44 | 2,559.44 |
| Interests in an Education IRA or under a Qualified IRA - Transamerica Life Insurance Account Number 106752LK8 | State Tuition Plan 735 ILCS 5/12-1006 | 101,594.84 | 101,594.84 |
| College Fund for Minor Dependent American Funds VCSP/ College America Account Number 74739251 | 735 ILCS 5/12-1001(j) | 39,814.41 | 39,814.41 |

¹ continuation sheets attached to Schedule of Property Claimed as Exempt

B6C (Official Form 6C) (4/13) -- Cont.

| In re | ROBERT A WILSCHEK, |
|-------|--------------------|
| | KIMBERLY WILSCHEK |

| Case No. |
|----------|
|----------|

Debtors

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

(Continuation Sheet)

| Description of Property | Specify Law Providing Each Exemption | Value of Claimed Exemption | Current Value of Property Without Deducting Exemption |
|---|---|----------------------------------|---|
| College Fund for minor dependent American Funds VCSP/College America Account Number 74739044 | 735 ILCS 5/12-1001(j) | 57,057.67 | 57,057.67 |
| Interests in IRA, ERISA, Keogh, or Other Pension | | 40 420 20 | 40 420 20 |
| Debtor 401(k) Xlem | 735 ILCS 5/12-1006 | 19,436.28 | 19,436.28 |
| IRA - RBC Capital Markets LLC Accout 70506312 | 735 ILCS 5/12-1006 | 77,211.29 | 77,211.29 |
| IRA - RBC Capital Markets, LLC Account Number 705-06480 | 735 ILCS 5/12-1006 | 57,124.86 | 57,124.86 |
| RA - Ameritrade Clearing Account Number 964-908852 | 735 ILCS 5/12-1006 | 28,953.09 | 28,953.09 |
| IRA - ING USA Annuity & Life Account Number C179368-OX | 735 ILCS 5/12-1006 | 183,906.53 | 183,906.53 |
| IRA - Community National Bank Account Number 00091009158 | 735 ILCS 5/12-1006 | 56,763.80 | 56,763.80 |
| 401(k) Edward Hospital with Fidelity Account Number 62990 | 735 ILCS 5/12-1006 | 2,427.36 | 2,427.36 |
| Automobiles, Trucks, Trailers, and Other Vehicle: 2007 Mitsubishi Endeavor 180,000 miles | <u>s</u> 735 ILCS 5/12-1001(c) | 2,400.00 | 5,114.00 |
| Office Equipment, Furnishings and Supplies desktop computer, laptop, injk jet printer | 735 ILCS 5/12-1001(b) | 500.00 | 500.00 |
| <u>Animals</u> family dog | 735 ILCS 5/12-1001(b) | 0.00 | 0.00 |

Total: 656,324.95 659,038.95

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B6D (Official Form 6D) (12/07)

| In re | ROBERT A WILSCHEK, |
|-------|--------------------|
| | KIMBERLY WILSCHEK |

| Case No. |
|----------|
|----------|

Debtors

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

| CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | C O D E B T O R | H W J | sband, Wife, Joint, or Community DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN | | CONTINGEN | UNLLQULDA | D I S P U T E D | AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL | UNSECURED PORTION, IF ANY |
|--|-----------------|-------------|--|---------------|-----------|-----------------------|-----------------|--|---------------------------------|
| Account No. | | | Tax Lien | | Т | D A T E D | | | |
| Internal Revenue Service Centralized Insolvency Operation PO Box 21125 Philadelphia, PA 19114 | | J | Single Family Home 3N901 Baert Lane St. Charles, Illinois Tax Lien 2009 1040 Taxes Value \$ 365,167.00 | | | D | | 36,306.12 | 867.33 |
| Account No. | ╁ | t | First Mortgage | <u>'</u> | \dashv | \dashv | \dashv | 30,300.12 | 807.33 |
| JP Morgan Chase Bank NA 120 S. LaSalle St. Chicago, IL 60603 | | J | Single Family Home 3N901 Baert Lane St. Charles, Illinois | | | | | | |
| | | | Value \$ 365,167.00 | , | | | | 264,147.51 | 0.00 |
| Account No. JP Morgan Chase Bank NA 120 S. LaSalle St. Chicago, IL 60603 | | J | Second Mortgage Single Family Home 3N901 Baert Lane St. Charles, Illinois | | | | | | |
| | ┖ | ╙ | Value \$ 365,167.00 |) | | | | 65,580.70 | 0.00 |
| Account No. | | | Value \$ | | | | | | |
| continuation sheets attached | | • | (Tot | S al of th | ubto | | | 366,034.33 | 867.33 |
| | | | (Report on Summary | of Scl | _ | otal ule: | | 366,034.33 | 867.33 |

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B6E (Official Form 6E) (4/13)

| In re | ROBERT A WILSCHEK, | Case No |
|-------|--------------------|---------|
| | KIMBERLY WILSCHEK | |

Debtors

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate If any entity other than a spouse in a joint case may be jointly habte on a claim, place an "X" in the column labeled "Codebtor, include the entity of the e

| Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules. Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data. Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data. |
|---|
| ☐ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E. |
| TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets) |
| ☐ Domestic support obligations |
| Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1). |
| ☐ Extensions of credit in an involuntary case |
| Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of trustee or the order for relief. 11 U.S.C. § 507(a)(3). |
| ☐ Wages, salaries, and commissions |
| Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sale representatives up to \$12,475* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4). |
| ☐ Contributions to employee benefit plans |
| Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5). |
| ☐ Certain farmers and fishermen |
| Claims of certain farmers and fishermen, up to \$6,150* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6). |
| ☐ Deposits by individuals |
| Claims of individuals up to \$2,775* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7). |
| ■ Taxes and certain other debts owed to governmental units |
| Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8). |
| ☐ Commitments to maintain the capital of an insured depository institution |
| Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federa Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9). |
| ☐ Claims for death or personal injury while debtor was intoxicated |
| Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10). |

continuation sheets attached

^{*} Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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B6E (Official Form 6E) (4/13) - Cont.

| In re | ROBERT A WILSCHEK, | | Case No | |
|-------|--------------------|---------|---------|--|
| | KIMBERLY WILSCHEK | | | |
| • | | Debtors | -, | |

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

Taxes and Certain Other Debts
Owed to Governmental Units

TYPE OF PRIORITY UNLIQUIDATED CODEBTOR Husband, Wife, Joint, or Community AMOUNT NOT ENTITLED TO PRIORITY, IF ANY CREDITOR'S NAME, ONTINGENT S P U T E D AND MAILING ADDRESS Н DATE CLAIM WAS INCURRED **AMOUNT** INCLUDING ZIP CODE, W AND CONSIDERATION FOR CLAIM OF CLAIM AMOUNT ENTITLED TO PRIORITY C AND ACCOUNT NUMBER (See instructions.) 2012 Income Taxes Account No. Internal Revenue Service 0.00 **Centralized Insolvency Operation** PO Box 21125 Philadelphia, PA 19114 6,165.07 6,165.07 Account No. Account No. Account No. Account No. Subtotal 0.00 Sheet <u>1</u> of <u>1</u> continuation sheets attached to (Total of this page) Schedule of Creditors Holding Unsecured Priority Claims 6,165.07 6,165.07 Total 0.00 (Report on Summary of Schedules) 6,165.07 6,165.07

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B6F (Official Form 6F) (12/07)

| In re | ROBERT A WILSCHEK, KIMBERLY WILSCHEK | | Case No | |
|-------|---|---------|---------|--|
| | | Debtors | 7 | |

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

| CREDITOR'S NAME, | CC | Hu | sband, Wife, Joint, or Community | CO | U | D | |
|--|-----------------|-------------|----------------------------------|-------------|-------------|--------|-----------------|
| MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | C O D E B T O R | C A H | | ONT INGEN | QUL | SPUTED | AMOUNT OF CLAIM |
| Account No. various accounts | | | Consumer Debt | Ī | T E D | | |
| American Express PO Box 0001 Los Angeles, CA 90096-8000 | | J | | | D | | 4,235.00 |
| Account No. xxxx-xxxx-2687 | t | | Consumer Debt | t | | H | |
| Ann Taylor MC PO Box 65969 San Antonio, TX 78265-9569 | | w | | | | | 8,149.93 |
| Account No. xxxx-xxxx-xxxx-0609 | ┢ | | Consumer Debt | + | | H | 0,143.33 |
| Bank of America PO Box 851001 PA 15285-1001 | | J | | | | | |
| | | | | | | | 7,870.89 |
| Account No. xxx4084 Cadence 25 North Winfield Road Winfield, IL 60190 | | J | 9/14/14 Medical | | | | 1,783.40 |
| continuation sheets attached | | | (Total of | Subt his | | | 22,039.22 |

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B6F (Official Form 6F) (12/07) - Cont.

| In re | ROBERT A WILSCHEK, | Case No. |
|-------|--------------------|----------|
| _ | KIMBERLY WILSCHEK | , |

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

| _ | _ | | | _ | _ | _ | 1 |
|--|-----------------|-------------|---|-----------|-----------------|--------|-----------------|
| CREDITOR'S NAME, | C | Hu | sband, Wife, Joint, or Community | | U N L | P | |
| MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | C O D E B T O R | C A M | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONFINGEN | RL I QU I DATED | U T | AMOUNT OF CLAIM |
| Account No. xxxx-xxxx-xxxx-7254 | | | Consumer Debt | Т | E | | |
| Capital One PO Box 6492 Carol Stream, IL 60197-6492 | | w | | | D | | 1,720.45 |
| Account No. xxxx-xxxx-2590 | T | | Consumer Debt | T | Т | | |
| Chase P.O. Box 15651 Wilmington, DE 19886-5651 | | w | | | | | 25,436.33 |
| Account No. xxxx-xxxx-5088 | t | | Consumer Debt | + | H | | |
| Chase P.O. Box 15651 Wilmington, DE 19886-5651 | | J | | | | | 13,948.28 |
| Account No. xxxx-xxxx-4581 | | | Consumer Debt | | | | |
| Chase P.O. Box 15651 Wilmington, DE 19886-5651 | | н | | | | | 4,695.52 |
| Account No. | t | H | Consumer Debt | + | \vdash | H | |
| CitiBank P.O. 6500 Sioux Falls, SD 57117 | | н | | | | | 9,575.29 |
| Sheet no1 of _4 sheets attached to Schedule of | | | | Subt | tota | 1 | EE 27E 07 |
| Creditors Holding Unsecured Nonpriority Claims | | | (Total of t | his | pag | e) | 55,375.87 |

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B6F (Official Form 6F) (12/07) - Cont.

| In re | ROBERT A WILSCHEK, | Case No. |
|-------|--------------------|----------|
| | KIMBERLY WILSCHEK | |

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

| | С | Hus | sband, Wife, Joint, or Community | С | U | D | |
|--|-----|------------------|---|-------------|----|---|-----------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | 0 0 | H W J C | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CORFLEGEE | N | | AMOUNT OF CLAIM |
| Account No. xxxxi000 | | | Medical | ٦ | TE | | |
| Community Therapy Services 40W310 LaFox Road Saint Charles, IL 60175 | | J | | | D | | 597.05 |
| Account No. xxxx-xxxx-6868 | | | Consumer Debt | | | | 337.03 |
| Discover PO Box 30943 Salt Lake City, UT 84130 | | w | | | | | |
| | | | | | | | 12,128.89 |
| Account No. xxxx-xxxx-xxxx-2835 Discover More Card PO Box 30943 Salt Lake City, UT 84130 | | w | Consumer Debt | | | | 11,931.17 |
| Account No. xx6813 | | | Medical | | | | |
| Dryer Medical Clinic c/o Malcolm S. Gerald and Associate 332 South Michigan Ave Chicago, IL 60604 | | J | | | | | 156.87 |
| Account No. xx9543 | | | Medical | | | | |
| DuPage Medical Group 15921 Collections Center Chicago, IL 60693-0159 | | J | | | | | 1,164.00 |
| | | | | | | L | 1,104.00 |
| Sheet no. 2 of 4 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | (Total of | Sub this | | | 25,977.98 |

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B6F (Official Form 6F) (12/07) - Cont.

| In re | ROBERT A WILSCHEK, | Case No |
|-------|--------------------|---------|
| | KIMBERLY WILSCHEK | |

Debtors SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

| (See instructions above.) Account No. xxxxx-xxxxx-0067 HSBC PO Box 15524 Wilmington, DE 19850 Account No. Internal Revenue Service Centralized Insolvency Operation PO Box 21125 Philadelphia, PA 19114 Janice Read Schneider 40 W 304 LaFox Road Saint Charles, IL 60175 Consumer Debt To SSIBLET TO SETOPT, SO STATE. So Account No. Laternal Revenue Service Centralized Insolvency Operation PO Box 21125 Philadelphia, PA 19114 Janice Read Schneider 40 W 304 LaFox Road Saint Charles, IL 60175 Consumer Debt To SSIBLET TO SETOPT, SO STATE. So Account No. Laternal Revenue Service Centralized Insolvency Operation PO Box 21125 Philadelphia, PA 19114 Services Rendered Account No. Services Rendered Accountant Consumer Debt Consumer Debt | | 1- | | | — | - | 1- | |
|--|---|------------------|--------|-----------------------------------|--------|---------------|--------|-----------------|
| ACCOUNT NO. XXXX-XXXX-XXXX-0067 HSBC PO Box 15524 Willmington, DE 19850 Account No. Internal Revenue Service Centralized Insolvency Operation PO Box 21125 Philadelphia, PA 19114 Account No. Internal Revenue Service Centralized Insolvency Operation PO Box 2125 Philadelphia, PA 19114 Account No. Internal Revenue Service Centralized Insolvency Operation PO Box 21125 Philadelphia, PA 19114 Account No. Internal Revenue Service Centralized Account No. Internal Revenue Service Centralized Insolvency Operation PO Box 21125 Philadelphia, PA 19114 Account No. Internal Revenue Service Centralized Insolvency Operation PO Box 2125 Philadelphia, PA 19114 Account No. Consumer Debt Account No. Services Rendered Accountant Account No. Services Rendered Accountant Account No. XXX-XXX7-008 Kohl Payment Center P.O. 2983 Milwaukee, WI 53201 Account No. STATE. DATE CLAIM WAS INCLAIM WAS | | l o | I ' | sband, Wite, Joint, or Community | | N | ĺ | |
| Account No. XXXX-XXXX-XXXX-0067 HSBC PO Box 15524 Wilmington, DE 19850 Account No. Internal Revenue Service Centralized Insolvency Operation PO Box 21125 Philadelphia, PA 19114 Account No. Janice Read Schneider 40 W 304 LaFox Road Saint Charles, IL 60175 Kohl Payment Center PO Box 2125 Account No. XXX-XXXX-XXX7-008 Kohl Payment Center P.O. 2983 Milwaukee, WI 53201 M 4,62 Account No. 2009 Dischargeable Income Tax J 2010 Discharbeable Income Tax Account Tax J 36,30 Account No. Services Rendered Accountant Consumer Debt Account No. XXX-XXXX7-008 Consumer Debt | INCLUDING ZIP CODE, AND ACCOUNT NUMBER | E B T O | W J | CONSIDERATION FOR CLAIM. IF CLAIM | I N | | SPUTED | AMOUNT OF CLAIM |
| H H SBC PO Box 15524 Wilmington, DE 19850 H H 2009 Dischargeable Income Tax Account No. Internal Revenue Service Centralized Insolvency Operation PO Box 21125 Philadelphia, PA 19114 2010 Discharbeable Income Tax Internal Revenue Service Centralized Insolvency Operation PO Box 21125 Philadelphia, PA 19114 36,30 Account No. Internal Revenue Service Centralized Insolvency Operation PO Box 21125 Philadelphia, PA 19114 Services Rendered Account No. Janice Read Schneider 40 W 304 LaFox Road Saint Charles, IL 60175 Consumer Debt Kohl Payment Center P.O. 2983 Milwaukee, WI 53201 | Account No. xxxx-xxxx-x0067 | ╁ | | Consumer Debt | - | A T E | | |
| PO Box 15524 Wilmington, DE 19850 H Account No. Internal Revenue Service Centralized Insolvency Operation PO Box 21125 Philadelphia, PA 19114 Internal Revenue Service Centralized Insolvency Operation PO Box 21125 Philadelphia, PA 19114 Internal Revenue Service Centralized Insolvency Operation PO Box 21125 Philadelphia, PA 19114 Services Rendered Account No. Janice Read Schneider 40 W 304 LaFox Road Saint Charles, IL 60175 Account No. xxx-xxx7-008 Kohl Payment Center P.O. 2983 Milwaukee, WI 53201 | | 1 | | | L | D | + | |
| Wilmington, DE 19850 Account No. Internal Revenue Service Centralized Insolvency Operation PO Box 21125 Philadelphia, PA 19114 Account No. Internal Revenue Service Centralized insolvency Operation PO Box 21125 Philadelphia, PA 19114 June Tenal Revenue Service Centralized insolvency Operation PO Box 21125 Philadelphia, PA 19114 Services Rendered Account No. Janice Read Schneider 40 W 304 LaFox Road Saint Charles, IL 60175 Account No. xxx-xxx7-008 Kohl Payment Center P.O. 2983 Milwaukee, WI 53201 Milwaukee, WI 53201 | | | ш | | | | | |
| Account No. Internal Revenue Service Centralized Insolvency Operation PO Box 21125 Philadelphia, PA 19114 Account No. Internal Revenue Service Centralized Insolvency Operation PO Box 21125 Philadelphia, PA 19114 J 2010 Discharbeable Income Tax J 2010 Discharbeable Income Tax Internal Revenue Service Centralized Insolvency Operation PO Box 21125 Philadelphia, PA 19114 Account No. Janice Read Schneider 40 W 304 LaFox Road Saint Charles, IL 60175 Consumer Debt Kohl Payment Center P.O. 2983 Milwaukee, WI 53201 | | | l | | | | | |
| Account No. Internal Revenue Service Centralized Insolvency Operation PO Box 21125 Philadelphia, PA 19114 Account No. Internal Revenue Service Centralized Insolvency Operation PO Box 21125 Philadelphia, PA 19114 Internal Revenue Service Centralized Insolvency Operation PO Box 21125 Philadelphia, PA 19114 Services Rendered Account No. Janice Read Schneider 40 W 304 LaFox Road Saint Charles, IL 60175 Account No. xxx-xxx7-008 Kohl Payment Center P.O. 2983 Milwaukee, WI 53201 Account No. 500 Dischargeable Income Tax Account Tax J Consumer Debt Consumer Debt | 3 , | | | | | | | |
| Internal Revenue Service Centralized Insolvency Operation PO Box 21125 Philadelphia, PA 19114 2010 Discharbeable Income Tax Internal Revenue Service Centralized Insolvency Operation PO Box 21125 Philadelphia, PA 19114 36,30 Account No. Janice Read Schneider 40 W 304 LaFox Road Saint Charles, IL 60175 Account No. xxx-xxx7-008 Kohl Payment Center P.O. 2983 Milwaukee, WI 53201 J 2010 Discharbeable Income Tax Services Rendered Account Tax 1 | | L | | | \bot | \perp | | 4,626.82 |
| Centralized Insolvency Operation PO Box 21125 Philadelphia, PA 19114 Account No. Internal Revenue Service Centralized Insolvency Operation PO Box 21125 Philadelphia, PA 19114 Account No. Janice Read Schneider 40 W 304 LaFox Road Saint Charles, IL 60175 Account No. xxx-xxx7-008 Kohl Payment Center P.O. 2983 Milwaukee, WI 53201 Janice Read Schneider Month Payment Center P.O. 2983 Milwaukee, WI 53201 Janice Read Schneider Janice Read Schneider Janice Read Schneider Account No. xxx-xxx7-008 Consumer Debt | Account No. | ł | | 2009 Dischargeable Income Tax | | | | |
| PO Box 21125 Philadelphia, PA 19114 Account No. Internal Revenue Service Centralized Insolvency Operation PO Box 21125 Philadelphia, PA 19114 Account No. Janice Read Schneider 40 W 304 LaFox Road Saint Charles, IL 60175 Account No. xxx-xxx7-008 Kohl Payment Center P.O. 2983 Milwaukee, WI 53201 Account No. 2010 Joscharbeable Income Tax Joscharbeable Income Tax Services Rendered Accountant Accountant Services Rendered Accountant Accountant Consumer Debt | Internal Revenue Service | | | | | | | |
| Philadelphia, PA 19114 Account No. Internal Revenue Service Centralized Insolvency Operation PO Box 21125 Philadelphia, PA 19114 Account No. Janice Read Schneider 40 W 304 LaFox Road Saint Charles, IL 60175 Account No. xxx-xxx7-008 Kohl Payment Center P.O. 2983 Milwaukee, WI 53201 Account No. Services Rendered Account No. Servi | | | J | | | | | |
| Account No. Internal Revenue Service Centralized Insolvency Operation PO Box 21125 Philadelphia, PA 19114 Account No. Janice Read Schneider 40 W 304 LaFox Road Saint Charles, IL 60175 Account No. xxx-xxx7-008 Kohl Payment Center P.O. 2983 Milwaukee, WI 53201 Account No. 36,30 Services Rendered Accountant Consumer Debt Consumer Debt | | | | | | | | |
| Internal Revenue Service Centralized Insolvency Operation PO Box 21125 Philadelphia, PA 19114 Account No. Janice Read Schneider 40 W 304 LaFox Road Saint Charles, IL 60175 Account No. xxx-xxx7-008 Kohl Payment Center P.O. 2983 Milwaukee, WI 53201 J Services Rendered Accountant Services Rendered Accountant J Consumer Debt | Timadelpina, FA 13114 | | | | | | | 36,306.12 |
| Centralized Insolvency Operation PO Box 21125 Philadelphia, PA 19114 Account No. Janice Read Schneider 40 W 304 LaFox Road Saint Charles, IL 60175 Account No. xxx-xxx7-008 Kohl Payment Center P.O. 2983 Milwaukee, WI 53201 Milwaukee, WI 53201 | Account No. | | | 2010 Discharbeable Income Tax | \top | \dagger | | |
| Centralized Insolvency Operation PO Box 21125 Philadelphia, PA 19114 Account No. Janice Read Schneider 40 W 304 LaFox Road Saint Charles, IL 60175 Account No. xxx-xxx7-008 Kohl Payment Center P.O. 2983 Milwaukee, WI 53201 Milwaukee, WI 53201 J Services Rendered Accountant Consumer Debt | Internal Devenue Consider | | | | | | | |
| PO Box 21125 Philadelphia, PA 19114 Account No. Account No. Janice Read Schneider 40 W 304 LaFox Road Saint Charles, IL 60175 Account No. xxx-xxx7-008 Kohl Payment Center P.O. 2983 Milwaukee, WI 53201 Services Rendered Accountant Consumer Debt | | | J | | | | | |
| Account No. Janice Read Schneider 40 W 304 LaFox Road Saint Charles, IL 60175 Account No. xxx-xxx7-008 Kohl Payment Center P.O. 2983 Milwaukee, WI 53201 Services Rendered Accountant Services Rendered Accountant Consumer Debt | PO Box 21125 | | | | | | | |
| Account No. Janice Read Schneider 40 W 304 LaFox Road Saint Charles, IL 60175 Account No. xxx-xxx7-008 Kohl Payment Center P.O. 2983 Milwaukee, WI 53201 Services Rendered Accountant J Consumer Debt | Philadelphia, PA 19114 | | | | | | | 18,056.98 |
| Janice Read Schneider 40 W 304 LaFox Road Saint Charles, IL 60175 Account No. xxx-xxx7-008 Kohl Payment Center P.O. 2983 Milwaukee, WI 53201 Accountant J Accountant Consumer Debt | Account No. | ╁ | | Services Rendered | + | $\frac{1}{1}$ | | 10,000.00 |
| 40 W 304 LaFox Road Saint Charles, IL 60175 Account No. xxx-xxx7-008 Kohl Payment Center P.O. 2983 Milwaukee, WI 53201 Milwaukee, WI 53201 | | 1 | | Accountant | | | | |
| Saint Charles, IL 60175 Account No. xxx-xxx7-008 Kohl Payment Center P.O. 2983 Milwaukee, WI 53201 Consumer Debt | | | ١. | | | | | |
| Account No. xxx-xxx7-008 Kohl Payment Center P.O. 2983 Milwaukee, WI 53201 Consumer Debt | | | ٦ | | | | | |
| Account No. xxx-xxx7-008 Kohl Payment Center P.O. 2983 Milwaukee, WI 53201 Consumer Debt | Camit Charles, IL 66176 | | | | | | | |
| Kohl Payment Center P.O. 2983 Milwaukee, WI 53201 | | | | | | | | 625.00 |
| P.O. 2983 Milwaukee, WI 53201 | Account No. xxx-xxx7-008 | | | Consumer Debt | \top | | | |
| P.O. 2983 Milwaukee, WI 53201 | Kohl Payment Center | | | | | | | |
| Milwaukee, WI 53201 | | | J | | | | | |
| | | | | | | | | |
| | | | | | | | | 1,500.00 |
| Sheet no. 3 of 4 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims 61,11 | | | | · | | | | 61,114.92 |

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| In re | ROBERT A WILSCHEK, | Case No. |
|-------|--------------------|----------|
| _ | KIMBERLY WILSCHEK | , |

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

| | | _ | | | | | |
|---|----------|--------------|-----------------------------------|---------|----------|-----|-----------------|
| CREDITOR'S NAME, | CO | Hu | sband, Wife, Joint, or Community | C | U | D | |
| MAILING ADDRESS | CODEBTOR | н | DATE CLAIM WAS INCURRED AND | C O N T | DXLLQD. | S | |
| INCLUDING ZIP CODE, | B | W | CONSIDERATION FOR CLAIM. IF CLAIM | Į, | ļ | Įψ | AMOUNT OF CLAIM |
| AND ACCOUNT NUMBER (See instructions above.) | Ö | C | IS SUBJECT TO SETOFF, SO STATE. | Ğ | | | |
| (See instructions above.) | R | $oxed{oxed}$ | | INGENT | A | Þ | |
| Account No. | l | | 9/25/14 | T | E | | |
| | 1 | | Medical | \perp | D | L | |
| PFF Emergency Services | l | | | | | | |
| PO Box 366 | l | J | | | | | |
| Hinsdale, IL 60522 | l | | | | | | |
| | l | | | | | | |
| | l | | | | | | 87.11 |
| Account No. | Ͱ | ⊣ | Services Rendered | + | ╁ | ╁ | |
| Account No. | ł | | Services Refluered | | | | |
| Calinas Brothers Inc | l | | | | | | |
| Salinas Brothers, Inc. 12N663 II Rt. 47 | l | J | | | | | |
| | l | " | | | | | |
| Hampshire, IL 60140 | l | | | | | | |
| | l | | | | | | 4.750.00 |
| | | | | | | | 1,750.00 |
| Account No. | | | 3014585 | | | | |
| | 1 | | Legal | | | | |
| Smith Amundsen | l | | | | | | |
| 150 N Michigan Ave | l | J | | | | | |
| Chicago, IL | l | | | | | | |
| | l | | | | | | |
| | l | | | | | | 357.00 |
| Account No. | ╁ | Н | | + | | | |
| | 1 | | | | | | |
| Verizon Wireless | l | | | | | | |
| 1515 Woodfield Road | l | J | | | | | |
| Suite 1400 | l | | | | | | |
| Schaumburg, IL 60173 | l | | | | | | |
| | | | | | | | 200.00 |
| Account No. | T | Г | | T | T | T | |
| | 1 | | | | | | |
| | l | | | | | | |
| | l | | | | | | |
| | l | | | | | | |
| | l | | | | | | |
| | l | | | | | | |
| | _ | Щ | L | <u></u> | <u> </u> | Ļ | |
| Sheet no. <u>4</u> of <u>4</u> sheets attached to Schedule of | | | | Sub | | | 2,394.11 |
| Creditors Holding Unsecured Nonpriority Claims | | | (Total of t | his | pag | ge) | 2,00 /// |
| | | | | 7 | Γota | al | |
| | | | (Report on Summary of So | | | | 166,902.10 |

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B6G (Official Form 6G) (12/07)

| In re | ROBERT A WILSCHEK, | Case No. |
|-------|--------------------|----------|
| | KIMBERLY WILSCHEK | |

Debtors

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

■ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract. Case 14-42311 Doc 1 Filed 11/24/14 Entered 11/24/14 09:27:45 Desc Main Document Page 26 of 50

B6H (Official Form 6H) (12/07)

| In re | ROBERT A WILSCHEK, | Case No. |
|-------|---------------------|----------|
| | KIMBERI Y WII SCHEK | |

Debtors

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR

NAME AND ADDRESS OF CREDITOR

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| Fill in this information to | o identify your cas | se: | |
|---------------------------------|---------------------|---|--|
| Debtor 1 | ROBERT A W | ILSCHEK | |
| Debtor 2 (Spouse, if filing) | KIMBERLY W | | |
| United States Bankrupt | tcy Court for the: | NORTHERN DISTRICT OF ILLINOIS, EASTERN DIVISION | |
| Case number (If known) | | | Check if this is: ☐ An amended filing ☐ A supplement showing post-petition chapter |
| Official Form | D GI | | 13 income as of the following date: |

Official Form B 61

MM / DD/ YYYY Schedule I: Your Income

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

12/13

Describe Employment Fill in your employment **Debtor 1** Debtor 2 or non-filing spouse information. ■ Employed Employed If you have more than one job, **Employment status** attach a separate page with ■ Not employed ■ Not employed information about additional employers. Occupation Regional Manager **Childbirth Educator** Include part-time, seasonal, or Employer's name Xylem, Inc. **Edward Hospital** self-employed work. **Employer's address** Occupation may include student **PO Box 900** P.O. 4207 or homemaker, if it applies. Carol Stream, IL 60197 Seneca Falls, NY 13148 How long employed there? 2 1/2 years 4 1/2 years

Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary, and commissions (before all payroll 7,291.66 491.91 2. deductions). If not paid monthly, calculate what the monthly wage would be. Estimate and list monthly overtime pay. 3. 0.00 +\$ 0.00 Calculate gross Income. Add line 2 + line 3. 7,291.66 491.91

Schedule I: Your Income Official Form B 6I page 1

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ROBERT A WILSCHEK

Debtor 1

Debtor 2 KIMBERLY WILSCHEK Case number (if known) For Debtor 2 or For Debtor 1 non-filing spouse Copy line 4 here 7.291.66 491.91 List all payroll deductions: Tax, Medicare, and Social Security deductions 5a. 1,312.22 57.05 Mandatory contributions for retirement plans 5b. \$ \$ 5b. 437.49 59.16 5c. Voluntary contributions for retirement plans 5c. \$ 433.<u>01</u> 0.00 5d. Required repayments of retirement fund loans 5d. \$ \$ 0.00 0.00 5e. Insurance 5e. \$ 797.68 0.00 5f. 5f. **Domestic support obligations** \$ 0.00 0.00 5g. **Union dues** 5g. \$ 0.00 0.00 Other deductions. Specify: Wheelsautoallow 5h.+ 97.50 0.00 6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. 3,077.90 116.21 Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. 7. \$ 4.213.76 375.70 8. List all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8a. 0.00 1.579.27 8b. Interest and dividends 8b. 0.00 0.00 Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. 0.00 0.00 8d. **Unemployment compensation** 8d. 0.00 0.00 **Social Security** 8e. 0.00 0.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8f. 0.00 0.00 Pension or retirement income 8g. 8g. 0.00 0.00 8h.+ 8h. Other monthly income. Specify: \$ \$ 0.00 0.00 Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. 0.00 1,579.27 10. Calculate monthly income. Add line 7 + line 9. \$ 10. \$ \$ 1,954.97 6,168.73 4,213.76 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. 11. Specify: +\$ 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it 6,168.73 12. applies Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? No. Yes. Explain:

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| Fill | in this informa | ation to identify yo | our case: | | | | | |
|------------|-------------------------------|--|-------------------------|--|---|------------|--|--|
| | | | | | | ~ : | and With the t | |
| Deb | tor 1 | ROBERT A W | VILSCHE | K | | Ch | eck if this is: An amended filing | |
| Deb | tor 2 | KIMBERLY W | VII SCHE | K | | H | ū | wing post-petition chapter |
| (Spo | ouse, if filing) | | | | | _ | | the following date: |
| Unit | ed States Bankı | ruptcy Court for the: | | IERN DISTRICT OF ILLING RN DIVISION | OIS, | | MM / DD / YYYY | |
| | e number nown) | | | | | | A separate filing for 2 maintains a separate | or Debtor 2 because Debto arate household |
| Of | fficial Fo | orm B 6J | | | | | | |
| So | chedule | J: Your E | = Exper | ises | | | | 12/1: |
| Be info | as complete ormation. If m | and accurate as | possible. eded, atta | . If two married people ar ich another sheet to this | | | | |
| Par | | ribe Your House | hold | | | | | |
| 1. | Is this a join | | | | | | | |
| | □ No. Go to | o line 2. es Debtor 2 live i | n a conor | ata hausahald? | | | | |
| | _ | | n a separ | ate nousenoid? | | | | |
| | ■ N | - | . £! | anata Cabadula I | | | | |
| | ШY | es. Deptor 2 mus | it file a sep | parate Schedule J. | | | | |
| 2. | Do you hav | e dependents? | □ No | | | | | |
| | Do not list D and Debtor | | ■ Yes. | Fill out this information for each dependent | Dependent's relation Debtor 1 or Debtor 2 | | Dependent's age | Does dependent live with you? |
| | Do not state | the | | | | | | □ No |
| | dependents' | names. | | | Son | | | Yes |
| | | | | | Son | | | □ No |
| | | | | | 3011 | | | ■ Yes □ No |
| | | | | | | | | ☐ Yes |
| | | | | | | | | □ No |
| | | | | | | | | ☐ Yes |
| 3. | expenses of | penses include of people other the d your depender | nan $_{f \Box}$ | No Yes | | | | |
| | t 2: Estim | nate Your Ongoir | ng Month | y Expenses | <u> </u> | | | |
| exp | | a date after the b | | uptcy filing date unless y y is filed. If this is a supp | | | | |
| the | | h assistance and | | government assistance i cluded it on <i>Schedule I:</i> \ | | | Your exp | enses |
| 4. | | or home owners! and any rent for the | | ses for your residence. In or lot. | nclude first mortgage | 4. | \$ | 2,515.06 |
| | If not include | ded in line 4: | | | | | | |
| | 4a. Real | estate taxes | | | | 4a. | \$ | 0.00 |
| | • | erty, homeowner's | - | | | 4b. | · | 0.00 |
| | | maintenance, re | • | | | 4c. | | 250.00 |
| 5 | | eowner's associati | | dominium dues our residence, such as ho | me equity loans | 4d. 5 | | 39.58 510.44 |

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| Debtor 1 Debtor 2 ROBERT A WILSCHEK KIMBERLY WILSCHEK | | | Case num | ber (if known) | |
|--|--|--|----------|--------------------------|-----------|
| 6. | Utiliti | es: | | | |
| | 6a. | Electricity, heat, natural gas | 6a. | · | 362.00 |
| | 6b. | Water, sewer, garbage collection | 6b. | · | 79.00 |
| | 6c. | Telephone, cell phone, Internet, satellite, and cable services | 6c. | · | 299.36 |
| | 6d. | Other. Specify: ADT - Alarm | 6d. | | 39.00 |
| 7. | Food | and housekeeping supplies | 7. | · | 700.00 |
| 8. | Child | care and children's education costs | 8. | \$ | 0.00 |
| 9. | Cloth | ing, laundry, and dry cleaning | 9. | \$ | 450.00 |
| 10. | Perso | onal care products and services | 10. | \$ | 0.00 |
| 11. | Medic | cal and dental expenses | 11. | \$ | 600.00 |
| 12. | | sportation. Include gas, maintenance, bus or train fare. | 40 | Φ. | 250.00 |
| 40 | | ot include car payments. | 12. | · | |
| | | tainment, clubs, recreation, newspapers, magazines, and books | 13. | \$ | 250.00 |
| | | table contributions and religious donations | 14. | \$ | 65.00 |
| 15. | | ot include insurance deducted from your pay or included in lines 4 or 20. | 4.5 | • | |
| | | Life insurance | 15a. | | 350.00 |
| | | Health insurance | 15b. | · | 0.00 |
| | | Vehicle insurance | 15c. | \$ | 149.00 |
| | | Other insurance. Specify: | 15d. | \$ | 0.00 |
| | Speci | s. Do not include taxes deducted from your pay or included in lines 4 or 20. fy: IRS back taxes (2012 Non-Dischargeable) | 16. | \$ | 100.00 |
| 17. | | Ilment or lease payments: | | | |
| | | Car payments for Vehicle 1 | 17a. | | 0.00 |
| | | Car payments for Vehicle 2 | 17b. | · | 0.00 |
| | | Other. Specify: Fitness membership | 17c. | \$ | 225.00 |
| | | Other. Specify: | 17d. | \$ | 0.00 |
| | dedu | payments of alimony, maintenance, and support that you did not report as cted from your pay on line 5, Schedule I, Your Income (Official Form 6I). | 18. | · | 0.00 |
| 19. | | r payments you make to support others who do not live with you. | | \$ | 0.00 |
| | Speci | | 19. | | |
| 20. | | r real property expenses not included in lines 4 or 5 of this form or on Sch | | | 057.00 |
| | | Mortgages on other property | 20a. | · | 657.82 |
| | | Real estate taxes | 20b. | · | 0.00 |
| | | Property, homeowner's, or renter's insurance | 20c. | · | 0.00 |
| | | Maintenance, repair, and upkeep expenses | 20d. | · | 124.00 |
| | | Homeowner's association or condominium dues | 20e. | · | 0.00 |
| 21. | Other | r: Specify: | 21. | +\$ | 0.00 |
| 22. | Your | monthly expenses. Add lines 4 through 21. | 22. | \$ | 8,015.26 |
| | The re | esult is your monthly expenses. | | - | |
| 23. | Calcu | ulate your monthly net income. | | | |
| | 23a. | Copy line 12 (your combined monthly income) from Schedule I. | 23a. | \$ | 6,168.73 |
| | 23b. | Copy your monthly expenses from line 22 above. | 23b. | -\$ | 8,015.26 |
| | | | | | |
| | 23c. | Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> . | 23c. | \$ | -1,846.53 |
| 24. | 24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage? ■ No. □ Yes. | | | or decrease because of a | |
| | Expla | | | | |

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B6 Declaration (Official Form 6 - Declaration). (12/07)

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United States Bankruptcy Court Northern District of Illinois, Eastern Division

| In re | ROBERT A WILSCHEK KIMBERLY WILSCHEK | | Case No. | |
|-------|--|-----------|----------|---|
| | | Debtor(s) | Chapter | 7 |
| | | | 1 | · |

DECLARATION CONCERNING DEBTOR'S SCHEDULES

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

| | I declare under penalty of perjur sheets, and that they are true and correct t | • | ad the foregoing summary and schedules, consisting of _y knowledge, information, and belief. | 23 |
|------|---|-----------|--|----|
| Date | November 24, 2014 | Signature | /s/ ROBERT A WILSCHEK ROBERT A WILSCHEK Debtor | |
| Date | November 24, 2014 | Signature | /s/ KIMBERLY WILSCHEK KIMBERLY WILSCHEK Joint Debtor | |

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

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B7 (Official Form 7) (04/13)

United States Bankruptcy Court Northern District of Illinois, Eastern Division

| In re | ROBERT A WILSCHEK KIMBERLY WILSCHEK | | Case No. | |
|-------|--|-----------|----------|---|
| | | Debtor(s) | Chapter | 7 |
| | | | | |

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any persons in control of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(2), (31).

1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| AMOUNT | SOURCE |
|-------------|-------------------------------------|
| \$82,199.32 | 2013: Husband Wages from employment |
| \$40,883.00 | 2012: Husband Wages from employment |
| \$38,559.00 | 2013: Wife Wages from employment |
| \$27,579.00 | 2012: Wife Wages from employment |
| \$67,975.90 | 2014: Husband Wages YTD |
| \$24,063.50 | 2014 Wife Wages YTD |

COLIDOR

ANGUINE

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2. Income other than from employment or operation of business

None П

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the two years immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT

IRA distribution to cover living expenses \$21,000.00

2013

IRA Distribution to cover living expenses \$78,014.00

2012

3. Payments to creditors

None П

Complete a. or b., as appropriate, and c.

a. Individual or joint debtor(s) with primarily consumer debts: List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR Internal Revenue Service Mail Stop 5010 CHI 230 S. Dearborn Street Chicago, IL 60604

DATES OF **PAYMENTS Installment Agreement** monthly payment

AMOUNT PAID \$700.00

AMOUNT STILL OWING \$36,306.12

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$6,225*. If the debtor is an individual, indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

> **AMOUNT** DATES OF PAID OR PAYMENTS/ VALUE OF **TRANSFERS**

NAME AND ADDRESS OF CREDITOR

TRANSFERS c. All debtors: List all payments made within one year immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR

DATE OF PAYMENT

spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT PAID

AMOUNT STILL **OWING**

AMOUNT STILL

OWING

^{*} Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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4. Suits and administrative proceedings, executions, garnishments and attachments

None

a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT
AND CASE NUMBER
American Express Bank v. Kim Wilschek
14 SC 3848

NATURE OF PROCEEDING Judgment

COURT OR AGENCY AND LOCATION STATUS OR DISPOSITION

Sixteenth Judical Circuit Court, Kane Pending

County, Illinois

None

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE

DESCRIPTION AND VALUE OF PROPERTY

5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN

DESCRIPTION AND VALUE OF PROPERTY

6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE

DATE OF ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

None

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN NAME AND LOCATION OF COURT CASE TITLE & NUMBER

DATE OF ORDER DESCRIPTION AND VALUE OF PROPERTY

7. Gifts

None

List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION

RELATIONSHIP TO DEBTOR, IF ANY

DATE OF GIFT

DESCRIPTION AND VALUE OF GIFT

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8. Losses

None

List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case.** (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE

Springer Brown, LLC 400 S County Farm Road Wheaton, IL 60187 DATE OF PAYMENT, NAME OF PAYER IF OTHER THAN DEBTOR 1/21/2014

1/21/2014 2/5/2014 2/25/14 11/21/14 AMOUNT OF MONEY
OR DESCRIPTION AND VALUE

OF PROPERTY **\$900.00**

\$200.00 \$200.00 \$535.00

10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

None b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER

DEVICE

DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST

ANSFER(S) IN PROPERTY

11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

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12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS

Paperwork

DATE OF TRANSFER OR SURRENDER, IF ANY

Bank of America P.O. 5270 Carol Stream, IL 60197

13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

14. Property held for another person

None

List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER

DESCRIPTION AND VALUE OF PROPERTY

LOCATION OF PROPERTY

15. Prior address of debtor

None

If the debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS NAME USED DATES OF OCCUPANCY

16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

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NAME AND ADDRESS OF SITE NAME AND ADDRESS

DATE OF

ENVIRONMENTAL.

GOVERNMENTAL UNIT NOTICE LAW

b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous

Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

NAME AND ADDRESS OF

DATE OF

ENVIRONMENTAL

GOVERNMENTAL UNIT NOTICE LAW

c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which

the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the

docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT

SITE NAME AND ADDRESS

DOCKET NUMBER

STATUS OR DISPOSITION

18. Nature, location and name of business

None

a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

> LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO.

BEGINNING AND

ENDING DATES

NAME (ITIN)/ COMPLETE EIN **Medical Revenue**

3N901 Baert Lane

NATURE OF BUSINESS Medical billins and

Solutions, LLC

Saint Charles, IL 60175

ADDRESS

transcription

None b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

NAME **ADDRESS**

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within six years immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement only if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

19. Books, records and financial statements

None

a. List all bookkeepers and accountants who within **two years** immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

NAME AND ADDRESS

DATES SERVICES RENDERED

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None b. List all firms or individuals who within the **two years** immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

NAME ADDRESS

DATES SERVICES RENDERED

DOLLAR AMOUNT OF INVENTORY

PERCENTAGE OF INTEREST

(Specify cost, market or other basis)

None c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME ADDRESS

None d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within **two years** immediately preceding the commencement of this case.

,

INVENTORY SUPERVISOR

20. Inventories

NAME AND ADDRESS

None

None

a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory,

and the dollar amount and basis of each inventory.

None b. List the name and address of the person having possession of the records of each of the inventories reported in a., above.

DATE OF INVENTORY

DATE OF INVENTORY

NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY RECORDS

DATE ISSUED

21 . Current Partners, Officers, Directors and Shareholders

None a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS NATURE OF INTEREST

None b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns,

controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NAME AND ADDRESS
TITLE
NATURE AND PERCENTAGE
OF STOCK OWNERSHIP

22 . Former partners, officers, directors and shareholders

a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the

commencement of this case.

NAME ADDRESS DATE OF WITHDRAWAL

None b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within **one year**

■ immediately preceding the commencement of this case.

NAME AND ADDRESS TITLE DATE OF TERMINATION

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23. Withdrawals from a partnership or distributions by a corporation

None

If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

NAME & ADDRESS OF RECIPIENT, RELATIONSHIP TO DEBTOR

DATE AND PURPOSE OF WITHDRAWAL

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

24. Tax Consolidation Group.

None

If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within **six years** immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

25. Pension Funds.

None

If the debtor is not an individual, list the name and federal taxpayer-identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER (EIN)

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DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

| Date | November 24, 2014 | Signature | /s/ ROBERT A WILSCHEK |
|------|-------------------|-----------|-----------------------|
| | | | ROBERT A WILSCHEK |
| | | | Debtor |
| | | | |
| Date | November 24, 2014 | Signature | /s/ KIMBERLY WILSCHEK |
| | | | KIMBERLY WILSCHEK |
| | | | Joint Debtor |

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

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B8 (Form 8) (12/08)

United States Bankruptcy Court Northern District of Illinois, Eastern Division

| In re | ROBERT A WILSCHEK KIMBERLY WILSCHEK | | | Case No. | | |
|------------------|--|-----------------------------|---|---------------------------------------|-----------------------------------|--|
| | | | Debtor(s) | Chapter | 7 | |
| PART | CHAPTER 7 A - Debts secured by property property of the estate. Attack | | must be fully comple | | | |
| Proper | ty No. 1 | | | | | |
| Credit | tor's Name: E- | | Describe Property S | Securing Deb | t: | |
| | ty will be (check one): Surrendered | ☐ Retained | | | | |
| | ning the property, I intend to (ch Redeem the property Reaffirm the debt Other. Explain | | oid lien using 11 U.S.C | C. § 522(f)). | | |
| | ty is (check one): Claimed as Exempt | | ☐ Not claimed as ex | empt | | |
| | B - Personal property subject to additional pages if necessary.) | unexpired leases. (All thre | ee columns of Part B mu | ust be complet | red for each unexpired lease. | |
| Proper | ty No. 1 | | | | | |
| Lesson | r's Name: E- | Describe Leased Pr | roperty: | Lease will b U.S.C. § 36. □ YES | e Assumed pursuant to 11 5(p)(2): | |
| person Date _ | re under penalty of perjury tha al property subject to an unexp November 24, 2014 November 24, 2014 | | /s/ ROBERT A WILSO ROBERT A WILSO Debtor /s/ KIMBERLY WILSO | CHEK EK | estate securing a debt and/or | |
| _ | | | KIMBERLY WILSCHI Joint Debtor | | | |

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United States Bankruptcy Court Northern District of Illinois, Eastern Division

| In re | ROBERT A WILSCHEK KIMBERLY WILSCHEK | | Case No. | | |
|-------|--|-------------------------------------|------------------------|------------------------|--------------|
| | | Debtor(s) | Chapter | 7 | |
| | DISCLOSURE OF COMPENSAT | TION OF ATTO | RNEY FOR DE | BTOR(S) | |
| | Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I compensation paid to me within one year before the filing of the rendered on behalf of the debtor(s) in contemplation of or in | e petition in bankruptcy | , or agreed to be paid | to me, for services re | |
| | For legal services, I have agreed to accept | | \$ | 1,800.00 | |
| | Prior to the filing of this statement I have received | | \$ | 1,800.00 | |
| | Balance Due | | \$ | 0.00 | |
| 2. | \$335.00 of the filing fee has been paid. | | | | |
| 3. | The source of the compensation paid to me was: | | | | |
| | ■ Debtor □ Other (specify): | | | | |
| 4. | The source of compensation to be paid to me is: | | | | |
| | ■ Debtor □ Other (specify): | | | | |
| 5. | ■ I have not agreed to share the above-disclosed compensation | on with any other person | unless they are memb | pers and associates of | my law firm. |
| | ☐ I have agreed to share the above-disclosed compensation w copy of the agreement, together with a list of the names of | | | | aw firm. A |
| 5. | In return for the above-disclosed fee, I have agreed to render le | egal service for all aspec | ts of the bankruptcy c | ase, including: | |
| | a. Analysis of the debtor's financial situation, and rendering acb. Preparation and filing of any petition, schedules, statement ofc. Representation of the debtor at the meeting of creditors andd. [Other provisions as needed] | of affairs and plan which | n may be required; | - | ruptcy; |
| 7. | By agreement with the debtor(s), the above-disclosed fee does in | not include the following | g service: | | |
| | CER | RTIFICATION | | | |
| | I certify that the foregoing is a complete statement of any agree bankruptcy proceeding. | ment or arrangement for | payment to me for re | presentation of the de | ebtor(s) in |
| Date | d: November 24, 2014 | /s/ Richard G Lar | | | |
| | | Richard G Larse Springer Brown, | | | |
| | | 400 S. County Fa | | | |
| | | Suite 330 | . . . | | |
| | | Wheaton, IL 6018 630-510-0000 Fa | | | |

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS, EASTERN DIVISION

NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days <u>before</u> the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total Fee \$335)

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

<u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total Fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over

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Form B 201A, Notice to Consumer Debtor(s)

Page 2

a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1,167 filing fee, \$550 administrative fee: Total Fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total Fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

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B 201B (Form 201B) (12/09)

United States Bankruptcy Court Northern District of Illinois, Eastern Division

| In re | ROBERT A WILSCHEK KIMBERLY WILSCHEK | | Case No. | |
|-------|--|-----------|----------|---|
| | | Debtor(s) | Chapter | 7 |
| | CERTIFICATION OF UNDER § 342(I | | R(S) | |

Certification of Debtor

I (We), the debtor(s), affirm that I (we) have received and read the attached notice, as required by § 342(b) of the Bankruptcy Code.

| ROBERT A WILSCHEK KIMBERLY WILSCHEK | X | /s/ ROBERT A WILSCHEK | November 24, 2014 |
|-------------------------------------|---|------------------------------------|-------------------|
| Printed Name(s) of Debtor(s) | | Signature of Debtor | Date |
| Case No. (if known) | X | /s/ KIMBERLY WILSCHEK | November 24, 2014 |
| | | Signature of Joint Debtor (if any) | Date |

Instructions: Attach a copy of Form B 201 A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

United States Bankruptcy Court Northern District of Illinois, Eastern Division

| In re | ROBERT A WILSCHEK KIMBERLY WILSCHEK | | Case No. | |
|-------|--|---|-----------------|---------------------------|
| 11110 | KINDERET WILSOTIER | Debtor(s) | Chapter | 7 |
| | | | | |
| | VER | RIFICATION OF CREDITOR MA | ATRIX | |
| | | Number of O | Creditors: | 41 |
| | The above-named Debtor(s) h (our) knowledge. | nereby verifies that the list of creditor | ors is true and | correct to the best of my |
| Date: | November 24, 2014 | /s/ ROBERT A WILSCHEK | | |
| | | Signature of Debtor | | |
| Date: | November 24, 2014 | /s/ KIMBERLY WILSCHEK | | |
| | | KIMBERLY WILSCHEK | | |
| | | Signature of Debtor | | |

American Express PO Box 0001 Los Angeles, CA 90096-8000

Ann Taylor MC PO Box 65969 San Antonio, TX 78265-9569

ARS National Service PO Box 463023 Escondido, CA 92046-3023

Bank of America PO Box 851001 PA 15285-1001

Blitt & Gaines 661 Glenn Avenue Wheeling, IL 60090

Cadence 25 North Winfield Road Winfield, IL 60190

Capital One PO Box 6492 Carol Stream, IL 60197-6492

Chase P.O. Box 15651 Wilmington, DE 19886-5651

Chase P.O. Box 15651 Wilmington, DE 19886-5651

Chase P.O. Box 15651 Wilmington, DE 19886-5651

CitiBank P.O. 6500 Sioux Falls, SD 57117 Client Services, Inc. 3451 Harry S. Truman Blvd Saint Charles, MO 63301-4047

Community Therapy Services 40W310 LaFox Road Saint Charles, IL 60175

Discover PO Box 30943 Salt Lake City, UT 84130

Discover More Card PO Box 30943 Salt Lake City, UT 84130

Dryer Medical Clinic c/o Malcolm S. Gerald and Associate 332 South Michigan Ave Chicago, IL 60604

DuPage Medical Group 15921 Collections Center Chicago, IL 60693-0159

Global Credit & Collection Corp PO Box 71083 Charlotte, NC 28272-1083

HSBC PO Box 15524 Wilmington, DE 19850

Internal Revenue Service Centralized Insolvency Operation PO Box 21125 Philadelphia, PA 19114

Internal Revenue Service Centralized Insolvency Operation PO Box 21125 Philadelphia, PA 19114 Internal Revenue Service Centralized Insolvency Operation PO Box 21125 Philadelphia, PA 19114

Internal Revenue Service Centralized Insolvency Operation PO Box 21125 Philadelphia, PA 19114

Janice Read Schneider 40 W 304 LaFox Road Saint Charles, IL 60175

JP Morgan Chase Bank NA 120 S. LaSalle St. Chicago, IL 60603

JP Morgan Chase Bank NA 120 S. LaSalle St. Chicago, IL 60603

Kohl Payment Center P.O. 2983 Milwaukee, WI 53201

LTD Financial Services 7322 Southwest Freeway Suite 1600 Houston, TX 77074

Midland Credit Management 8875 Aero Drive Suite 200 San Diego, CA 92123-2255

MRS Associates 1930 Olney Ave. Cherry Hill, NJ 08003

MRS of New Jersey 1930 Olney Ave Cherry Hill, NJ 08003 Nationwide Credit Inc 3835 N Freeway Blvd #115 Sacramento, CA 95834

NCO Financial Systems P O Box 41417 Philadelphia, PA 19101-1457

NCO Financial Systems, Inc. 507 Prudential Road Horsham, PA 19044

PFF Emergency Services PO Box 366 Hinsdale, IL 60522

Salinas Brothers, Inc. 12N663 Il Rt. 47 Hampshire, IL 60140

Smith Amundsen 150 N Michigan Ave Chicago, IL

United Recovery Systems 5800 N Course Drive Houston, TX 77072

United Recovery Systems PO 722910 Houston, TX 77272

Verizon Wireless 1515 Woodfield Road Suite 1400 Schaumburg, IL 60173

Zwicker and Associates 7366 N. Lincoln Ave. Suite 102 Lincolnwood, IL 60712